10619393

PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number: **10/619,393**

CLAIMS AS FILED – PART I

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)	SMALL ENTITY RATE	FEE	OR	OTHER THAN SMALL ENTITY RATE	FEE
BASIC FEE (37 CFR 1.16(a))	40			$____	OR	Basic $750	
TOTAL CLAIMS (37 CFR 1.16(c))	40 minus 20 =	20	X $____		OR	X $18	360
INDEPENDENT CLAIMS (37 CFR 1.16(b))	4 minus 3 =	1	X $____		OR	X $84	84
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ $____		OR	+ $200	
* If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL		OR	TOTAL	$1,194.00

CLAIMS AS AMENDED – PART II

AMENDMENT A

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	39	Minus	40		X $____		OR	X $	
Independent (37 CFR 1.16(b))	3	Minus	4		X $____		OR	X $____	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $____		OR	+ $____	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

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AMENDMENT B

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	39	Minus	40		X $____		OR	X $____	
Independent (37 CFR 1.16(b))	4	Minus	4		X $____		OR	X $____	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $____		OR	+ $____	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

10-20-05

AMENDMENT C

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	39	Minus	40		X $____		OR	X $____	
Independent (37 CFR 1.16(b))	4	Minus	4		X $____		OR	X $____	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $____		OR	+ $____	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.